

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	12 minus 20=	*
INDEPENDENT CLAIMS	4 minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT		

SMALL ENTITY
TYPE

OR	OTHER THAN SMALL ENTITY
	RATE <input type="checkbox"/>
	345.00
OR	RATE <input type="checkbox"/>
	690.00
OR	X\$ 9= <input type="checkbox"/>
	X\$18= <input type="checkbox"/>
OR	X39= <input type="checkbox"/>
	X78= <input type="checkbox"/>
OR	+130= <input type="checkbox"/>
	+260= <input type="checkbox"/>
OR	TOTAL <input type="checkbox"/>
	768

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

SMALL ENTITY

OR	OTHER THAN SMALL ENTITY
	RATE <input type="checkbox"/>
	X\$ 9= <input type="checkbox"/>
	X\$18= <input type="checkbox"/>
OR	X39= <input type="checkbox"/>
	X78= <input type="checkbox"/>
OR	+130= <input type="checkbox"/>
	+260= <input type="checkbox"/>
OR	TOTAL <input type="checkbox"/>
	ADDITIONAL FEE

BEST AVAILABLE COPY

(Column 1)

(Column 2)

(Column 3)

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL
FEE

OR	ADDITIONAL FEE
	RATE <input type="checkbox"/>
	X\$ 9= <input type="checkbox"/>
	X\$18= <input type="checkbox"/>
OR	X39= <input type="checkbox"/>
	X78= <input type="checkbox"/>
OR	+130= <input type="checkbox"/>
	+260= <input type="checkbox"/>
OR	TOTAL <input type="checkbox"/>
	ADDITIONAL FEE

(Column 1)

(Column 2)

(Column 3)

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	*	Minus	** =
Independent	*	Minus	***	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

ADDITIONAL
FEE

OR	ADDITIONAL FEE
	RATE <input type="checkbox"/>
	X\$ 9= <input type="checkbox"/>
	X\$18= <input type="checkbox"/>
OR	X39= <input type="checkbox"/>
	X78= <input type="checkbox"/>
OR	+130= <input type="checkbox"/>
	+260= <input type="checkbox"/>
OR	TOTAL <input type="checkbox"/>
	ADDITIONAL FEE

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.